

DEPARTMENT OF BUILDING AND SAFETY
COUNTY OF LOS ANGELES

WM. J. FOX, CHIEF ENGINEER

APPLICATION FOR PERMIT

BUILDING

1

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 718 W. Carson St.
LOCALITY Torrance, Cal. P.
NEAREST CROSS ST. VERMONT
OWNER E.E. Gregory
MAIL ADDRESS 718 W. Carson St.
CITY Torrance TEL. NO. TORR 2637
ARCHITECT OR ENGINEER Same TEL. NO. Same

ADDRESS
CONTRACTOR owner TEL. NO.

LEGAL DESCRIPTION LOT NO. 40 BLOCK

TRACT 3239

SIZE OF LOT 110x271.48 NO. OF BLDGS. NOW ON LOT 1
USE OF CAB. SHOP NO. OF FAMILIES NO. OF ROOMS
EXISTING BLDG. Tool Shop

DESCRIPTION OF WORK

NEW ☒ ALTERATION ☐ ADDITION ☐
REPAIR ☐ MOVING ☐ DEMOLISH ☐
SQ. FT. SIZE 240 NO. OF ROOMS 1 STORIES 1
WALL COVERING RW Sidings ROOF COVERING 9" paper
USE OF NEW BUILDING Tool Storage
(F.A.S.)

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.

SIGNATURE OF PERMITTEE E.E. Gregory
AUTHORIZED AGT.

DBS-3 50M SETS 1-48 \$

VALUATION

700⁰⁰

P. C. S.
FEE
* 300

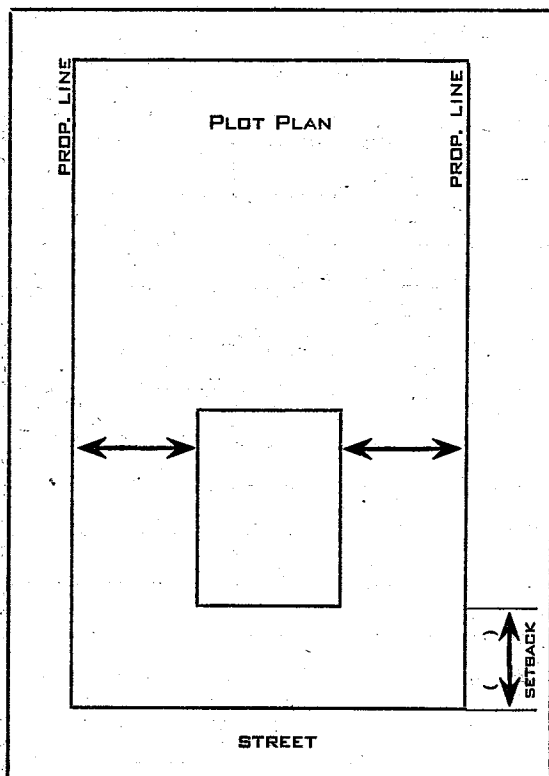
FOR OFFICE USE ONLY

DISTRICT NO. 7 PLAN CK. NO. — PERMIT NO. 29818
RECEIVED BY RTS DATE OF APPL. — DATE ISSUED 10/7/48
BUILDING ADDRESS 714 718 W. CARSON
LOCALITY KEYSTONE
NEAREST CROSS ST. VERMONT
FIRE ZONE — NO. OF PLANS — TYPE V GROUP G
BLDG. SETBACK LINE 50' & ORD. NO. 2323
APPROVED BY CARSON DATE
USE ZONE M-3 APPROVED BY DATE
4229 CORRECTIONS

ORIGINAL

APPROVALS

FOUNDATION: LOCATION FORMS, MATERIALS	INSPECTOR	DATE
FRAME: FIRE STOPS, BRACING, BOLTS		
LATH, INT.:		
LATH, EXT.:		
PLASTER, INT.		
PLASTER, EXT.		
FINAL	<u>Bury</u>	<u>5-18</u>



Map Number.....

No. Assigned By.....

Field Check By.....

Date.....

DEPARTMENT OF BUILDING AND SAFETY
COUNTY OF LOS ANGELES
 WM. J. FOX, CHIEF ENGINEER

APPLICATION FOR PERMIT

PLUMBING**1**

NATURE OF INSTALLATION				DISTRICT NO.	GROUP	ZONE	PERMIT NO.
ROUGH		FIXTURES		7			80091
HEATER		CESSPOOL		RECEIVED BY	READY FOR FIRST INSPECTION		DATE ISSUED
GAS		MISCELLANEOUS		<i>AKS</i>			2-18-48

APPLICANT FILL IN HEAVILY OUTLINED PORTION ONLY																														
PLUMBER	NAME <u>G-VON BANK</u>		JOB ADDRESS <u>714 718-W-CARSON</u>																											
	ADDRESS <u>1526-WILMINGTON BLVD</u>		LOCALITY <u>KEYSTONE</u>																											
	CITY <u>WILMINGTON</u>	TEL. NO. <u>TE-4-3311</u>	NEAREST CROSS ST. <u>FIGUEROA</u>																											
	COUNTY CERT. NO. <u>195-M</u>	EXPIRES <u>6/30/48</u>																												
LOCATION OF SEPTIC TANK, OR CESSPOOL <div style="text-align: center;">NORTH</div> <div style="border: 1px solid black; height: 150px; width: 100%; position: relative;"> <div style="position: absolute; left: -20px; top: 50%; transform: translateY(-50%);">WEST</div> <div style="position: absolute; right: -20px; top: 50%; transform: translateY(-50%);">EAST</div> </div> <div style="text-align: center;">SOUTH</div>																														
		OWNER NAME <u>F-E-GREGORY</u> MAIL ADDRESS <u>1129-W-ANAHEIM</u> CITY <u>WILMINGTON</u> TEL. NO. <u>TE-4-2022</u> I AM THE LEGAL POSSESSOR OF THE ABOVE LOS ANGELES COUNTY CERTIFICATE OF QUALIFICATION. <u>G Von Bank</u> PLUMBER I AM THE LEGAL OWNER OF THE PROPERTY DESCRIBED ABOVE. <div style="text-align: right;">OWNER</div>																												
DESCRIPTION OF WORK <table style="width:100%;"> <tr> <td><input type="checkbox"/> BATH TUB</td> <td><input type="checkbox"/> FURNACE</td> </tr> <tr> <td><input type="checkbox"/> SHOWER</td> <td><input type="checkbox"/> DISHWASHER</td> </tr> <tr> <td><input type="checkbox"/> LAVATORY</td> <td><input type="checkbox"/> REFRIGERATOR</td> </tr> <tr> <td><input checked="" type="checkbox"/> KITCHEN SINK</td> <td><input type="checkbox"/> WATER SOFTENER</td> </tr> <tr> <td><input type="checkbox"/> FLOOR SINK</td> <td><input type="checkbox"/> SAND TRAP</td> </tr> <tr> <td><input type="checkbox"/> SLOP SINK</td> <td><input type="checkbox"/> FLOOR DRAIN</td> </tr> <tr> <td><input type="checkbox"/> WASH TRAY</td> <td><input type="checkbox"/> URINAL</td> </tr> <tr> <td><input checked="" type="checkbox"/> WATER CLOSET</td> <td><input type="checkbox"/> DRINKING FOUNTAIN</td> </tr> <tr> <td><input type="checkbox"/> WATER HEATER</td> <td><input type="checkbox"/> DENTAL LAVATORY</td> </tr> <tr> <td><input type="checkbox"/> METER <input type="checkbox"/> GAS OUTL</td> <td><input type="checkbox"/> SODA FOUNTAIN</td> </tr> </table>				<input type="checkbox"/> BATH TUB	<input type="checkbox"/> FURNACE	<input type="checkbox"/> SHOWER	<input type="checkbox"/> DISHWASHER	<input type="checkbox"/> LAVATORY	<input type="checkbox"/> REFRIGERATOR	<input checked="" type="checkbox"/> KITCHEN SINK	<input type="checkbox"/> WATER SOFTENER	<input type="checkbox"/> FLOOR SINK	<input type="checkbox"/> SAND TRAP	<input type="checkbox"/> SLOP SINK	<input type="checkbox"/> FLOOR DRAIN	<input type="checkbox"/> WASH TRAY	<input type="checkbox"/> URINAL	<input checked="" type="checkbox"/> WATER CLOSET	<input type="checkbox"/> DRINKING FOUNTAIN	<input type="checkbox"/> WATER HEATER	<input type="checkbox"/> DENTAL LAVATORY	<input type="checkbox"/> METER <input type="checkbox"/> GAS OUTL	<input type="checkbox"/> SODA FOUNTAIN							
<input type="checkbox"/> BATH TUB	<input type="checkbox"/> FURNACE																													
<input type="checkbox"/> SHOWER	<input type="checkbox"/> DISHWASHER																													
<input type="checkbox"/> LAVATORY	<input type="checkbox"/> REFRIGERATOR																													
<input checked="" type="checkbox"/> KITCHEN SINK	<input type="checkbox"/> WATER SOFTENER																													
<input type="checkbox"/> FLOOR SINK	<input type="checkbox"/> SAND TRAP																													
<input type="checkbox"/> SLOP SINK	<input type="checkbox"/> FLOOR DRAIN																													
<input type="checkbox"/> WASH TRAY	<input type="checkbox"/> URINAL																													
<input checked="" type="checkbox"/> WATER CLOSET	<input type="checkbox"/> DRINKING FOUNTAIN																													
<input type="checkbox"/> WATER HEATER	<input type="checkbox"/> DENTAL LAVATORY																													
<input type="checkbox"/> METER <input type="checkbox"/> GAS OUTL	<input type="checkbox"/> SODA FOUNTAIN																													
2 TOTAL NUMBER OF FIXTURES CESSPOOL <input type="checkbox"/> SEPTIC TANK <input type="checkbox"/>		CORRECTIONS <div style="height: 100px; border: 1px solid black; position: relative;"> <div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em; opacity: 0.5;">undecided only</div> </div>																												
TOTAL FEE <div style="border: 1px solid black; width: 100px; height: 50px; display: flex; align-items: center; justify-content: center; font-size: 1.5em;">150</div>		APPROVALS <table style="width:100%;"> <thead> <tr> <th></th> <th style="text-align: center;">DATE</th> <th style="text-align: center;">INSPECTOR'S NAME</th> </tr> </thead> <tbody> <tr> <td>ROUGH PLUMBING</td> <td style="text-align: center;">4-15</td> <td style="text-align: center;">83</td> </tr> <tr> <td>GAS PIPING</td> <td></td> <td></td> </tr> <tr> <td>GAS VENT</td> <td></td> <td></td> </tr> <tr> <td>CESSPOOL</td> <td></td> <td></td> </tr> <tr> <td>SEPTIC TANK</td> <td></td> <td></td> </tr> <tr> <td>SEWER</td> <td></td> <td></td> </tr> <tr> <td>UTILITY CO. NOTIFIED</td> <td></td> <td></td> </tr> <tr> <td>FINAL</td> <td></td> <td></td> </tr> </tbody> </table>			DATE	INSPECTOR'S NAME	ROUGH PLUMBING	4-15	83	GAS PIPING			GAS VENT			CESSPOOL			SEPTIC TANK			SEWER			UTILITY CO. NOTIFIED			FINAL		
	DATE	INSPECTOR'S NAME																												
ROUGH PLUMBING	4-15	83																												
GAS PIPING																														
GAS VENT																														
CESSPOOL																														
SEPTIC TANK																														
SEWER																														
UTILITY CO. NOTIFIED																														
FINAL																														